



First Aid, Accident and Sickness Policy

Policy Review and Approval

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Approved by:	Full Governing Board
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A copy of this policy and other related policies can be obtained from the School Office.

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1. Aims

The aims of this policy are to:

- Ensure the health and safety of all staff, students, and visitors.
- Ensure that staff and Governors are aware of their responsibilities with regards to health and safety.
- Provide a framework for responding to an incident and recording and reporting the outcomes

2. Legislation and Guidance

This policy is based on the [statutory framework for the Early Years Foundation Stage](#), advice from the Department for Education (DfE) on [first aid in schools](#) and [health and safety in schools](#), guidance from the Health and Safety Executive (HSE) on [incident reporting in schools](#), and the following legislation:

- [The Health and Safety \(First-Aid\) Regulations 1981](#), which state that employers must provide adequate and appropriate equipment and facilities to enable first aid to be administered to employees, and qualified first aid personnel
- [The Management of Health and Safety at Work Regulations 1992](#), which require employers to make an assessment of the risks to the health and safety of their employees
- [The Management of Health and Safety at Work Regulations 1999](#), which require employers to carry out risk assessments, make arrangements to implement necessary measures, and arrange for appropriate information and training
- [The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations \(RIDDOR\) 2013](#), which state that some accidents must be reported to the Health and Safety Executive (HSE), and set out the timeframe for this and how long records of such accidents must be kept
- [The Social Security \(Claims and Payments\) Regulations 1979](#), which set out rules on the retention of accident records
- [The Education \(Independent School Standards\) Regulations 2014](#), which require that suitable space is provided to cater for the medical and therapy needs of students

3. Roles and Responsibilities

3.1 Appointed person(s) and first aiders

The school has an appointed Lead First Aider. They are responsible for:

- Taking charge when someone is injured or becomes ill.
- Making sure there is an adequate supply of medical materials in first aid kits, and replenishing the contents of these kits.
- Making sure that an ambulance or other professional medical help is summoned when appropriate.

First aiders are trained and qualified to carry out the role (see Section 7) and are responsible for:

- Acting as first responders to any incidents; they will assess the situation where there is an injured or ill person, and provide immediate and appropriate treatment.
- Sending students home to recover, where necessary.
- Filling in an accident report on the same day as, or as soon as is reasonably practicable, after an incident.

- Keeping their contact details up to date.

A list of names of staff who are currently First Aid trained are displayed throughout the school.

3.2 The Governing Board

The Governing Board has ultimate responsibility for health and safety matters in the school, but delegates operational matters and day-to-day tasks to the Executive Head Teacher and staff members.

3.3 The Executive Head Teacher

The Executive Head Teacher is responsible for the implementation of this policy, including:

- Making sure that an appropriate number of trained first aid personnel are present in the school at all times.
- Making sure that first aiders have an appropriate qualification, keep training up to date and remain competent to perform their role.
- Making sure all staff are aware of first aid procedures.
- Making sure risk assessments are completed and appropriate measures are put in place by the appropriate members of staff.
- Making sure that Line Managers undertake risk assessments, as appropriate, and that appropriate measures are put in place.
- Making sure that adequate space is available for catering to the medical needs of students.
- Reporting specified incidents to the HSE when necessary (see Section 6).

3.4 Staff

School staff are responsible for:

- Making sure they follow first aid procedures.
- Making sure they know who the appointed person(s) and/or first aiders are in school.
- Completing accident reports for all incidents they attend to where a first aider is not called.
- Informing the Executive Head Teacher/Head of School or their Line Manager of any specific health conditions or first aid needs.

4. First Aid Procedures

4.1 In-school procedures

In the event of an accident resulting in injury:

- The closest member of staff present will assess the seriousness of the injury and seek the assistance of a qualified first aider, if appropriate, who will provide the required first aid treatment.
- The first aider, if called, will assess the injury and decide if further assistance is needed from a colleague or the emergency services. They will remain on the scene until help arrives.
- If the injured person (or their parents/carers, in the case of students) has not provided their consent to the school to receive first aid, the first aider will act in accordance with the alternative arrangements (for example, contacting a medical professional to deliver the treatment).
- The first aider will also decide whether the injured person should be moved or placed in a recovery position.

- If the first aider judges that a student is too unwell to remain in school, the Lead First Aider or pastoral member of staff will contact parents/carers and ask them to collect their child. On the parents/carers' arrival, the first aider will recommend next steps to them.
- We will not send a child home during school hours on their own.
- If emergency services are called, the Lead First Aider or pastoral member of staff will contact parents/carers immediately.
- If an ambulance is required, a member of staff will accompany the student if a parent/carer is not available. However, parents/carers will be notified immediately.
- The Lead First Aider or first aider will complete an accident report form on the same day or as soon as is reasonably practicable after an incident resulting in an injury.

The following procedure should be followed:

Suspected fractures: Parent/carer contacted, and if necessary, an ambulance will be called depending on the location of the suspected fracture.

Cuts and grazes: Examined, assessed, cleaned and plaster applied if necessary.

Bumps to the head: Examined, assessed, ice pack applied and monitored. Parent/carer informed and advised accordingly. In the case of a Primary phase student, a message is sent to alert other members of staff within the Primary phase. For students in the Secondary phase, an email will be sent to the staff teaching the student that day.

Illness: The Lead First Aider, or another appropriate first aider, will assess the severity of illness and make a decision if a parent/carer needs to be called.

The school will adhere to the Government [Guidance on the use of adrenaline auto-injectors in schools](#).

Medication

If we need to hold medication for a student i.e. for diabetes, epilepsy, an allergy etc. the information will be included in the student's Health Care Plan. In the case of school trips, the Trip Leader will liaise with the Lead First Aider to arrange for the student's emergency medication and Health Care Plan to be given to the Trip Lead and first aider.

Medication will only be administered by trained staff to Primary phase students; and for Secondary phase students, a trained member of staff will supervise the administration of medication, providing it is received in its original labelled packaging, and a Medication Consent Form is completed. This should be handed to a Receptionist in the School Office or directly to the Lead First Aider. The parent/carer is responsible for completing a subsequent consent form should the instructions of dosage change. The Lead First Aider will safely dispose of any medication that is not collected.

Arrangements for students with particular medical needs

Prior to joining Gildredge House, all medical details are required so that we can provide the level of care expected. Where appropriate, the Lead First Aider and parent/carer will compile a Health Care Plan, and review it every year, or during the year if necessary. All staff are regularly updated.

Parents/carers must keep the school informed of any changes to emergency contacts, including telephone numbers. Staff and those providing food will be informed of any information about food allergies provided by parents/carers.

Sickness and diarrhoea

A child should not return to school for 48 hours after the last time he/she has vomited or had diarrhoea.

Contagious illnesses

Parents/carers must alert the school's Attendance Team of any significant health concerns which may affect the health of others e.g. chicken pox etc. The school will inform other parents/carers. The confidentiality of individual children will be respected.

Cleanliness

The school is cleaned daily by the school cleaning staff, and checks are made at regular intervals throughout the day by staff to ensure toilets and classrooms are clean, tidy and free from hazards. In the Early Years Foundation Stage (EYFS), toys, furnishings, dressing up clothes, "spare clothes", sand and water play areas and other equipment are cleaned as appropriate.

Toilet hygiene

It is the expectation that all children in the EYFS will be 'dry'. However, if a child has a toileting accident, they will be helped to clean and dry themselves and be helped to change their clothes. The adult will then 'bag' the soiled clothes using a plastic carrier bag. Parents/carers will be informed.

Guidance on absence period

The guidance linked below refers to public health exclusions to indicate the time period a student should not attend school to reduce the risk of transmission during the infectious stage. This guidance must be followed by all parents/carers:

<https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/children-and-young-people-settings-tools-and-resources#exclusion-table>

4.2 Off-site Procedures

When taking students off the school premises, staff will make sure that they always have the following:

- A school mobile phone.
- A portable first aid kit including, at minimum:
 - A leaflet giving general advice on first aid.
 - 6 individually wrapped sterile adhesive dressings.
 - 1 large sterile unmedicated dressing.
 - 2 triangular bandages - individually wrapped and preferably sterile.
 - 2 safety pins.
 - Individually wrapped moist cleansing wipes.
 - 2 pairs of disposable gloves.
- Information about the specific medical needs of students.
- Parents/carers' contact details.
- When transporting students using a minibus or other large vehicle, the school will make sure the vehicle is equipped with a clearly marked first aid box containing, at minimum:

- 10 antiseptic wipes, foil packed.
- 1 conforming disposable bandage (not less than 7.5cm wide).
- 2 triangular bandages.
- 1 packet of 24 assorted adhesive dressings.
- 3 large sterile unmedicated ambulance dressings (not less than 15cm × 20 cm).
- 2 sterile eye pads, with attachments.
- 12 assorted safety pins.
- 1 pair of rustproof blunt-ended scissors.

Risk assessments will be completed by the Trip Lead prior to any educational visit that necessitates taking students off school premises.

The procedure in Section 4.1 will be followed as closely as possible for any off-site accidents (though whether the parents/carers can collect their child will depend on the location and duration of the trip).

There will always be at least one first aider with a current paediatric first aid (PFA) certificate on school trips and visits, as required by the statutory framework for the Early Years Foundation Stage (EYFS).

5. First Aid Equipment

A typical first aid kit in our school will include the following:

- A leaflet giving general advice on first aid.
- 20 individually wrapped sterile adhesive dressings (assorted sizes).
- 2 sterile eye pads.
- 2 individually wrapped triangular bandages (preferably sterile).
- 6 safety pins.
- 6 medium-sized individually wrapped sterile unmedicated wound dressings.
- 2 large sterile individually wrapped unmedicated wound dressings.
- 3 pairs of disposable gloves.

No medication is kept in first aid kits.

First aid kits are stored in as a minimum:

- The First Aid room.
- Reception.
- Science Prep Room.
- All Food, Art and Design Technology classrooms.
- The school kitchen.
- School vehicle.

6. Record-keeping and Reporting

6.1 First aid and accident records

- An accident report will be completed by the Lead First Aider or first aider on the school's medical database, Medical Tracker, on the same day or as soon as possible after an incident resulting in an injury.
- As much detail as possible will be supplied when reporting an accident.
- Records held in Medical Tracker will be retained by the school for a minimum of 3 years, in accordance with regulation 25 of the Social Security (Claims and Payments) Regulations 1979, and then securely disposed of.

6.2 Reporting to the HSE

The Lead First Aider will keep a record of any accident that results in a reportable injury, disease, or dangerous occurrence as defined in the RIDDOR 2013 legislation (regulations 4, 5, 6 and 7).

The Lead First Aider will report these to the Executive Head Teacher and then the HSE as soon as is reasonably practicable and in any event within 10 days of the incident - exceptions are indicated below. Fatal and major injuries and dangerous occurrences will be reported without delay i.e. by telephone and followed up in writing within 10 days.

School staff: reportable injuries, diseases or dangerous occurrences

These include:

- Death.
- Specified injuries, which are:
 - Fractures, other than to fingers, thumbs and toes.
 - Amputations.
 - Any injury likely to lead to permanent loss of sight or reduction in sight.
 - Any crush injury to the head or torso causing damage to the brain or internal organs.
 - Serious burns (including scalding) which:
 - covers more than 10% of the whole body's total surface area; or
 - causes significant damage to the eyes, respiratory system or other vital organs.
- Any scalping requiring hospital treatment.
- Any loss of consciousness caused by head injury or asphyxia.
- Any other injury arising from working in an enclosed space which leads to hypothermia or heat-induced illness, or requires resuscitation or admittance to hospital for more than 24 hours.
- Work-related injuries that lead to an employee being away from work or unable to perform their normal work duties for more than 7 consecutive days (not including the day of the incident). In this case, the Lead First Aider will report these to the HSE as soon as reasonably practicable and in any event within 15 days of the accident.
- Occupational diseases where a doctor has made a written diagnosis that the disease is linked to occupational exposure. These include:
 - Carpal tunnel syndrome.
 - Severe cramp of the hand or forearm.
 - Occupational dermatitis e.g. from exposure to strong acids or alkalis, including domestic bleach.
 - Hand-arm vibration syndrome.
 - Occupational asthma e.g. from wood dust.
 - Tendonitis or tenosynovitis of the hand or forearm.
 - Any occupational cancer.
 - Any disease attributed to an occupational exposure to a biological agent.
- Near-miss events that do not result in an injury but could have done. Examples of near-miss events relevant to schools include, but are not limited to:
 - The collapse or failure of load-bearing parts of lifts and lifting equipment.
 - The accidental release of a biological agent likely to cause severe human illness.
 - The accidental release or escape of any substance that may cause a serious injury or damage to health.
 - An electrical short circuit or overload causing a fire or explosion.

Students and other people who are not at work (e.g. visitors): reportable injuries, diseases or dangerous occurrences

These include:

- Death of a person that arose from, or was in connection with, a work activity*
- An injury that arose from, or was in connection with, a work activity* and where the person is taken directly from the scene of the accident to hospital for treatment.

*An accident “arises out of” or is “connected with a work activity” if it was caused by:

- A failure in the way a work activity was organised e.g. inadequate supervision of a field trip;
- The way equipment or substances were used e.g. lifts, machinery, experiments etc; and/or
- The condition of the premises e.g. poorly maintained or slippery floors.

Information on how to make a RIDDOR report is available here: [How to make a RIDDOR report, HSE](#)

6.3 Notifying Parents/Carers

The Lead First Aider or an appropriate member of staff will inform parents/carers of any accident or injury sustained by a student, and any first aid treatment given, on the same day, or as soon as reasonably practicable. Parents/carers will also be informed if emergency services are called.

7. Training

All school staff are able to undertake first aid training if they would like to.

All first aiders must have completed a training course and must hold a valid certificate of competence to show this. The school will keep a register of all trained first aiders, what training they have received, and when this is valid until.

The school will arrange for first aiders to retrain before their first aid certificates expire. In cases where a certificate expires, the school will arrange for staff to retake the full first aid course before being reinstated as a first aider.

At all times, at least one staff member will have a current paediatric first aid (PFA) certificate that meets the requirements set out in the Early Years Foundation Stage statutory framework. The PFA certificate will be renewed every three years.

8. Links with other policies

This policy is linked to the:

- EYFS and Primary Administration of Medication Policy
- Health and Safety Policy
- Risk Assessment Policy
- Supporting Students with Medical Conditions Policy